

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

FORM  
DR-2

(Rev. 07/2004)

DISCLOSURE  
REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa PAC

IMPORTANT: Indicate by # type of committee you are reporting for: 2

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other  
Political Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political  
Subdivision PAC ( 11 ) Local Ballot Issue

### CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

### For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

6052

WPS

WPS

WPS

Late reports are subject to  
possible civil and criminal  
penalties.

*Bob Skum*

SIGNATURE OF PERSON FILING REPORT

515-223-6060  
TELEPHONE

6-16-05  
DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED 1/19/2005

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.)

\$ 6,367.21

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

2,100.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... \$

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,575.00

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must  
be zero) (Attach DR-3)

\$ 6,892.21

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa PAC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/18/04	ID# CK#	Jason Hagge - Duplicate from 10/19/04 report 115 S Locust, Box 29 Winfield, IA		\$-150.00	<input type="checkbox"/>
10/18/04	ID# CK#	Frank O'Conner - Duplicate from 10/19/04 report 305 Locust Street, Box 737 Dubuque, IA		-100.00	<input type="checkbox"/>
10/18/04	ID# CK#	Leon Hendricks - Duplicate from 10/19/04 report 55 Jefferson, Box 351 Winterset, IA		-50.00	<input type="checkbox"/>
10/18/04	ID# CK#	Jim Wirtz - Duplicate from 10/19/04 report 3685 450th Street, Box 97 Emmetsburg, IA		-100.00	<input type="checkbox"/>
10/18/04	ID# CK#	Kipp Harris - Duplicate from 10/19/04 report 327 Chestnut Street Atlantic, IA		-100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ -500.00	
TOTAL (if last page of this schedule)				\$ 2,100.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 3  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURES

☒ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa PAC

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/31/2004	ID# 1148 CK# 2594	Stevens for Statehouse Committee	Reverse Entry - Voided check	\$ -100.00
12/31/2004	ID# 1336 CK# 2631	Amanda Ragan for Iowa Senate	Reverse Entry - Voided check	-200.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ -300.00
TOTAL (if last page of this schedule)				\$ 1,575.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 3 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE****COMMITTEE NAME** (Must be same as on Statement of Organization)Independent Insurance Agents of Iowa  
Political Action Committee**IMPORTANT:** Indicate by # type of committee you are reporting for: 2(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue**CANDIDATE COMMITTEES ONLY**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

ETHICS & CAMPAIGN  
DISCLOSURE BOARD

JAN 19 2005

FILED

JAN

**FORM  
DR-2**

(Rev. 07/2004)

**DISCLOSURE  
REPORT****For Office Use Only**

Comm. #

6052

Logged In

Scanned

Computer

Audited

Late reports are subject to  
possible civil and criminal  
penalties.

SIGNATURE OF PERSON FILING REPORT

(515) 223-6660  
TELEPHONE1-17-05  
DATE SIGNEDI AM FILING A January 19 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount MUST be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.) ..... \$

6,208.71

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) .....

2,600.00

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .... \$

8,808.71

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ....

1,875.00

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report balance must  
be zero) (Attach DR-3) ..... \$

6,933.71

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) ..... \$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

For Instructions, See Back of Form



<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)Independent Insurance Agents of Iowa  
Political Action Committee

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-18-04	ID# CK#	Jason Haque 115 S. Locust, Box 29 Winfield, IA 52659		\$ 150	<input type="checkbox"/>
10-18-04	ID# CK#	Frank O'Connor 305 Locust Street, Box 737 Dubuque, IA 52004		100	<input type="checkbox"/>
10-18-04	ID# CK#	Leon Hendricks 55 Sepperson, Box 351 Winfield, IA 52673		50	<input type="checkbox"/>
10-18-04	ID# CK#	Jim Wirtz 3685 450th Street, Box 97 Emmetsburg, IA 50536		100	<input type="checkbox"/>
10-18-04	ID# CK#	Kipp Harris 327 Chestnut Street Atlantic, IA 50022		100	<input type="checkbox"/>
12-30-04	ID# CK#	Don Fulwider 205 Prairie View Drive West Des Moines, IA 50266		175	<input type="checkbox"/>
12-30-04	ID# CK#	Rick Culp 4401 Douglas Avenue Urbandale, IA 50322		80	<input type="checkbox"/>
12-30-04	ID# CK#	Kevin Hummel 400 Evans Street, Box 2 Stearns, IA 51055		1,300	<input type="checkbox"/>
12-03-04	ID# CK#	Eldon Hunsicker 219 W. 4th Street, Box 370 Ottumwa, IA 52501		85	<input type="checkbox"/>
12-03-04	ID# CK#	Joe P. Haque 115 S. Locust, Box 29 Winfield, IA 52659		50	<input type="checkbox"/>

SUB-TOTAL

\$ 2190

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization)**
 Independent Insurance Agents of Iowa  
 Political Action Committee

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12-03-04	ID# CK#	Paul Pohlson 715 5th Avenue, Box 508 Grinnell, IA 50112		\$ 250	<input type="checkbox"/>
12-03-04	ID# CK#	Rue Sporer 214 W. 4th Street, Box 370 Ottumwa, IA 52501		50	<input type="checkbox"/>
12-03-04	ID# CK#	Phil Andrade 3343 Southgate Ct SW Cedar Rapids, IA 52406		110	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 410

TOTAL (If last page of this schedule)

\$ 2600

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 2 of 2  
 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
Independent Insurance Agents of Iowa  
Political Action Committee

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-22-04	ID# 1061 CK# 2841	Citizens to Re-Elect Wayne Ford P.O. Box 5042 Des Moines, IA 50306	Campaign Contribution	\$ 100
10-22-04	ID# 1318 CK# 2842	Paulsen for State House Committee P.O. Box 250 Hawthorne, IA 52233	Campaign Contribution	150
10-22-04	ID# 913 CK# 2843	The Carroll Committee 244 4th Avenue Carroll, IA 50012	Campaign Contribution	50
11-3-04	ID# 1516 CK# 2844	Ridley for Senate 113 North Market Street Oskaloosa, IA 52577	Campaign Contribution	400
11-18-04	ID# CK# 2846	C. Daniel Filiber 225 Prairie View Drive West Des Moines, IA 52766	PAC Administrative Expenses	100
11-20-04	ID# CK# 2847	Don Filiber 225 Prairie View Drive West Des Moines, IA 52766	PAC Administrative Expenses	75
12-7-04	ID# 1338 CK# 2848	Danielson for Senate 3906 Monterey Drive Waterloo, IA 50701	Campaign Contribution	250
12-7-04	ID# 1502 CK# 2849	Harcock for Senate 310 E. Main Street Edward, IA 52045	Campaign Contribution	250
SUB-TOTAL				\$ 1,375
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Independent Insurance Agents of Iowa*  
*Political Action Committee*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-7-04	ID# 1334 CK# 2850	Citizen for Schockjahn 221 Park Avenue Arlington, PA 50606	Campaign Contribution	\$ 250
12-7-04	ID# 1503 CK# 2851	Frank Wood for Senate P.O. Box 4002 Elbridge, IA 52748	Campaign Contribution	250
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 500
TOTAL (If last page of this schedule)				\$ 1875

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)